## **School-Based Private Duty Nursing Referral Form**

This form acts as a notification to the school, parent and DMAS that services were requested through the Medicaid Managed Care Organization (MCO) and are not covered under the Medicaid MCO contract.

Managed Care Organization:			
Name of person completion	ng this form:		
Contact number:			
Name of Child:			
Child's Medicaid ID:			
Name of School:			
Address of School:			
Please send this referral I		wing:	
1. Child's Parent:			
	Name		Date Notice Sent
	Telephone Number		Date of Contact
2. Special Education Dir	rector of the Child	l's School:	
Name			Date Notice Sent
3. Department of Medica	al Assistance Serv	vices (DMAS) Specialized Services Unit	(SSU)
Phone # 80-	4-786-6134	Fax to SSU at (804) 612-0043	Date Notice Sent
4. Private Duty Nursing		A.	D. N. C.
Name			Date Notice Sent
<b>Private Duty Nursing</b>	Provider Telepho	one Number	
<b>Comments:</b>			

## **School-Based Private Duty Nursing Referral Form Instructions**

This form is to be completed by the MCO immediately upon receipt of a request for school-based, private duty nursing services (PDN) (i.e., nursing services received while the child is at school).

- 1. The MCO should send this completed form to the:
  - a. Child's parent,
  - b. School Special Ed Director
  - c. PDN Provider
  - d. DMAS Specialized Services Unit (fax # is listed on the form). In addition to this form, the MCO should forward any clinical documentation that they received in relation to the PDN request, i.e., the plan of treatment, medical nursing needs assessment, etc. to the Specialized Services Unit to use for preauthorization of PDN if needed.
- 2. The MCO needs to contact the child's parent to notify them that they need to pursue coverage of PDN during the school day through the Special Education Director in the school district. Document the date of contact. If the MCO is unable to make contact with the Parent, please document this underneath the parent section. (For example, "Parent's do not have working telephone, unable to establish verbal contact."

When notifying the parent, the MCO should share the following information:

- a. The parent, a teacher, or another person (referring source) may request an evaluation for Special Education or to update the IEP at any time by writing or speaking to the special education administrator. Additional information about the referring process for special education is available in the Parent's Guide to Special Education handbook. This handbook is available through the school or online at <a href="https://www.doe.virginia.gov/special-ed/parents/parents">www.doe.virginia.gov/special-ed/parents/parents</a> guide.pdf.
- b. If the IEP team determines that the PDN is not needed in order for the child to receive their education, then the PDN may be covered by DMAS under EPSDT as a carve-out. The parent or PDN provider will need to notify the Specialized Services Unit at the phone number listed in #3 below that the PDN services are not covered through the school and request PDN services coverage through EPDST.
- c. If the parent does not get resolution, they may refer to the Office of Dispute Resolution and Administrative Services, Division of Special Education and Student Services, Virginia Department of Education at www.doe.virginia.gov/special ed/resolving disputes/index.shtml.
- 3. DMAS Specialized Services Unit in the MCH Division will also be involved to help facilitate this process and to review the case to see if it can be covered under fee-for-service as an EPSDT carve-out. If the MCO receives phone calls from the parent, school, provider, etc, regarding the status of the DMAS review, they can refer the caller to contact the Specialized Services Unit at 804-786-6134.